

Form CPF 18A: Report of Independent Expenditure Promoting Election or Defeat of Candidate(s)

Office of Campaign and Political Finance

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of M	0.0000000000000000000000000000000000000	

11/4/06

11/3/06

Office of Campaign and One Ashburton Place Boston, MA 02108 (617) 727-8352.	Political Finance	,		er er		
		November 6, 2006	4			
1. Date of Repo	rt: (Must be filed v	within 7 business days of expendi	ture(s) in excess of \$100.00 in a	ggregate)		
2 Evnenditure	s) Made Bv: Massac	chusetts Nurses Asso	ciation			
2. Expenditure(s) Made By: Massachusetts Nurses Association (Name of individual or group making expenditure)						
	340 ጥ	ırnpike St.,	Canton	02021		
	Stree	t Address	City/Town	Zip		
3. Name of Car	adidate(s) For Whom the Abo	Sysan Fary	or Defeat Promoted: State Sen	ate		
4. Expenditure	(s):					
Date Paid	To Whom Paid	Address	Purpose	Amount		
22.000.000			· · · · · · · · · · · · · · · · · · ·	FE1 59		

I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c.55, section 18A:

24 Jolma Rd

Worc. 01604

24 Jolma Rd.

Worc. 01604

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(1) the individual(s) or group who made the expenditure(s) described herein did not solicit or receive any contributions in contemplation of such expenditure(s); and

(2) the individual(s) or group who made the expenditure(s) described herein did not cooperate, consult or act in concert with or at the request or suggestion of any candidate, or political committee organized on behalf of any candidate, or any agent of a candidate or any political committee in making such expenditure(s).

I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Saltus Press

Saltus Press

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Katrina Anderson Director, Legislation and Government Affairs

Print Name of Individual Signer and Title (if signing on behalf of a group)